

Status: Finalized

## I. Center Identification

Organization Name: INDIANA SURGERY CENTER - EAST

Street Address: 5445 E. 16th Street

City: Indianapolis

County: Marion

Administrator Name: Lori Walton

Administrator Email: lwalton@ecommunity.com

ASC Web Address: www.communitysurgerycenter.com

Fiscal Year: 2015

Accredited: • Yes • No

Name of Accrediting Body: AAAHC

Deemed Status: O Yes O No

Corporate Tax Status: • For Profit • Non Profit

## II. Identification of Surgical Resources

Number of operating rooms	7	
Number of procedure rooms	2	

## III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	7476	9717
B. Ten Most Frequent Surgical Procedures Perfo CPT Code	ormed	Total Procedures
66984		936
62311		479
50590		472
64483		233

64493	233
G0260	230
47562	221
15777	217
19301	161
20610	158

## IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	2
a surgical encounter.	